Name in Full

Certificate of Death

Joseph G. Baker

Died at Town Oak Orchard County Frederick MARYLAND

Date 1899 Month January Day 25 Age Y. 70 M. 10 D. 15 Native of Frdk. Co. Md Occupation Farmer

Male / ~~Female~~ White / ~~Colored~~ Married / ~~Single~~ ~~Widow~~ / ~~Widower~~ Divorced

Number of children living one

Husband / ~~Wife~~ of Hanna Devilbiss

Father's Name William Baker

Mother's Name

Cause of Death: Primary Paralysis — How long sick

Immediate Expansion — Accident, Suicide, Homicide

Reported by Thomas P. Babington Md.

Address Unionville Frederick Co. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 65968

Name In Full

Certificate of Death

Jacob Beam

Died at Town Burkittsville County Fredericks MARYLAND

Date 189 Month / Day / Age Y. 78 M. D. Native of Occupation

Male White Married Widow Divorced

~~Female~~ Colored Single Widower Number of children living

Husband of

Wife

Father's Name

Mother's Name

Cause of Death: Primary — How long sick

Immediate 161 — Accident, Suicide, Homicide

Reported by Banner of Liberty 1-12

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79895

Name in Full: Carl Malchan Beitler

Certificate of Death: (D. Diller

Died at: Town: Loys County: Frederick MARYLAND

Date 1899 Month: Jany. Day: 2 Age Y. - M. - D. 29 Native of: Md. Occupation: —

Male White ~~Married~~ Widow Divorced

~~Female~~ ~~Colored~~ Single Widower Number of children living

Husband of Wife

Father's Name: George Henry Beitler Mother's Name: Anna Sarah Miller

Cause of Death: Primary: Acute Broncho-Pneumonia How long sick: 23 hrs

Immediate: Convulsions - 71 ~~Accident, Suicide, Homicide~~

Reported by: Chas. W. Diller

Address: D. P. Creek Maryland —

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Name in Full Reuben Biser

Certificate of Death

Died at Town Ijamsville County Frederick MARYLAND

Date 189 9 Month 1 Day 6 | Age Y. M. D. | Native of | Occupation

Male ~~Female~~ | White Colored | Married Single | Widow Widower | Divorced Number of children living

Husband of Wife

Father's Name | Mother's Name

Cause of Death: Primary Typhoid fever 1 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Banner of Liberty 1-12

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full

Certificate of Death

Jacob Bowersox

Died at Town Frederick County Fred. MARYLAND

Date 1899 Month Jan Day 20 Age Y. 98 M. 1 D. Native of Md. Occupation

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ Widow Widower Divorced Number of children living

Husband ~~Wife~~ ~~of~~ Emmaline Bowersox.

Father's Name

Mother's Name

141

Cause of Death: Primary Senile Debility

Immediate Asthenia.

How long sick 6 months.

Accident, Suicide, Homicide

Reported by Ira J. McCurdy

Address 12 N. Pat St.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 66968

Name In Full

Certificate of Death

William Brown

Town County

Died at Near Frederick. Fredk. MARYLAND

	Month	Day		Y.	M.	D.	Native of	Occupation
Date 1899	Jan	20	Age	\	\	14	Co.	—

Male ~~Female~~ ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name William Brown

Mother's Name

Cause of Death: Primary 161

Immediate Unknown

How long sick

~~Accident, Suicide, Homicide~~

Reported by ~~(Wm Brown)~~ A. T. Rice & Sons

Address 190 N. Mar[illegible]ket St. Frederick

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79998

Attended by Dr. ——

of ——

Seen by Coroner ——

of ——

Information contained in this certificate received from Wm Brown. Col.

of

Name in Full

Certificate of Death

Geo. Franklin Core

Died at Town Brunswick County Frederick MARYLAND

Date 189 9 Month Jan Day 10 | Age Y. 4 M. 7 D. 24 | Native of Md | Occupation child

Malo ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name Geo. Benjamin Core

Mother's Name Ida L. Knight

Cause of Death: Primary Abscess of Brain — How long sick 1 week

Immediate Convulsions 52 — ~~Accident, Suicide, Homicide~~

Reported by Levin West

Address Brunswick

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Received 1-10.99
6.45 PM

Name in Full Edward Cashour

Certificate of Death

Died at near Town Central County Frederick MARYLAND

Date 1899 Month 1 Day 18 Age Y. 50 M. D. Native of Occupation

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living 6

Husband of Wife

Father's Name Mother's Name

Cause of Death Primary Catarrh of Stomach How long sick

Immediate 81 Accident, Suicide, Homicide

Reported by Banner of Liberty 1-12

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79998

Name in Full — Certificate of Death

Ruth Adelaide Hobbs Cashner.

Died at — Town: New London. — County: Frederick — MARYLAND

Date 1899 — Month: Jan — Day: 10 — Age: Y. 52 M. 4 D. 2 — Native of: Md. — Occupation: Housewife.

~~Male~~ / Female — White / ~~Colored~~ — Married / ~~Single~~ — ~~Widow~~ Widower — ~~Divorced~~ — Number of children living: 6.

Husband / Wife of: Edward Cashner.

Father's Name: Leonard Hobbs — Mother's Name: Elizabeth Day Hobbs

Cause of Death — Primary: Catarrh of Stomach — How long sick: 3 months.

Immediate: Exhaustion & I — ~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by: J. Thomas Shaw.

Address: Liberty Town Frederick Co Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 85868

Name in Full Elizabeth Jane Chesnut

Certificate of Death

Died at Town Brunswick County Frederick MARYLAND

Date 1899 Month Jan Day 27 | Age Y. 71 M. 1 D. 10 | Native of Md | Occupation

~~Male~~ White Married Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living Seven

~~Husband~~ of Wife John Chesnut

Father's Name

Mother's Name

Cause of Death: Primary 25 g

Immediate Cancer on Vulva

How long sick five months

Accident, Suicide, Homicide

Reported by C. H. Keefer Bro.

Address Brunswick Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

No Dr in Attendance

Received- 1-28 99

10 am

X-X

Name In Full John Collins

Certificate of Death

Died at Town Frederick County MARYLAND

Date 189 9 Month 1 Day 27 | Age Y. M. D. | Native of | Occupation

Male ~~Female~~ | White Colored | Married ~~Single~~ | Widow Widower | Divorced | Number of children living 4

Husband of Wife

Father's Name

Mother's Neme 145d

Cause of Death: Primary Killed by train — How long sick

Immediete — Accident, Suicide, Homicide

Reported by Brunswick Herald 2-3

Address

Must be signed by physician, if any in ettendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 70000

Name in Full Hattie Davis

Certificate of Death

Died at Town Frederick County " Frederick MARYLAND

Date 189 9 Month 1 Day 14 Age Y. 21 M. D. Native of Md Occupation H K

~~Male~~ ~~White~~ ~~Married~~ Widow ~~Divorced~~

Female Colored Single ~~Widower~~ Number of ~~children~~ living

Husband of Wife x

Father's Name Mike Henderson Mother's Name Jane Davis

Cause of Death Primary Phthisis Pul. How long sick 1 Year

Immediate Exhaustion 22a Accident, Suicide, Homicide

Reported by C. F. Goodlee M D. as Health Officer

Address gives the Certificate

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Basil Pinckney Dorsey

Died at Town: Johnsville County: Frederick MARYLAND

Date 1899 Month: Jan. Day: 7 Age Y. 67 M. 8 D. 23 Native of Md. Occupation Farmer

~~Male~~ ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~

Number of children living 1

Husband / Wife of Sarah Eugene Booker

Father's Name Adam Dorsey Mother's Name Annie Campbell

Cause of Death — Primary: Diabetis Mellitus with softening of Brain How long sick 10 weeks

Immediate: Diabetic Coma 28 ~~Accident, Suicide, Homicide~~

Reported by F. H. Sidwell

Address Johnsville Frdk Co, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Evans

Died at Town Brunswick County Fredk MARYLAND

Date 1899 Month Jan. Day 10 Age Y. M. D. 5 hours Native of Occupation

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ Number of children living Two

Husband of Wife

Father's Name William E Evans Mother's Name Minnie A Shoemaker

Cause of Death Primary Syanosis 137 How long sick

Immediate Premature birth ~~Accident, Suicide, Homicide~~

Reported by Clarence S Rether

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, [illegible]

Received - 1 - 11. 99
4.30 PM

Name In Full Infant of Geo F. & Famie Eyster — Certificate of Death

Died at Town Emmitsburg County Frederick MARYLAND

Date 189 9 Month Jan Day 7 Age Y. 3 M. D. Native of Maryland Occupation

Male / ~~Female~~ — White / ~~Colored~~ — Married / Single — Widow / Widower — ~~Divorced~~ — ~~Number of children living~~

Husband / Wife of

Father's Name Geo F. Eyster — Mother's Name Famie Frailey

Cause of Death — Primary 161 — How long sick 3 Days

Immediate — ~~Accident, Suicide, Homicide~~

Reported by M. F. Shuff Undertaker

Address Emmitsburg Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 70798

Attended by Dr. Robert L. Dorman
of Emmitsburg Md

Attended by Dr. _____
of _____

Information contained in this certificate received from M. F. Shuff Emmitsburg Md

Name in Full

Certificate of Death

Zachariah Fairfax

Died at Town: Liberty, County: Frederick MARYLAND

Date 189 9 Month: Jan. Day: 13 | Age Y. 60. M. 6. D. 4. | Native of Md | Occupation Farmer

Male ~~Female~~ | ~~White~~ Colored | Married ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ | Number of children living 3

Husband of Wife Sophia Fairfax

Father's Name George Fairfax | Mother's Name Bettie Howard.

Cause of Death: Primary Valvular Disease & Dropsy of Heart - How long sick Complaining 1 Year

Immediate Heart failure 5-7 | ~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by J. Thomas Fair

Address Liberty Frederick Co. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, [illegible]

Name In Full

Certificate of Death

Mrs Elizabeth Fleming

Died at Near Liberty (Town) Fredk (County) Co —— MARYLAND

Date 189 9 January 13. (Month Day) | Age Y. 76 M. 0 D. 0 | Native of Ind | Occupation

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ ~~Single~~ | Widow ~~Widower~~ | ~~Divorced~~ ~~Number~~ of children living None

Husband ~~Wife~~ of Author Fleming

Father's Name Dont Know | Mother's Name Dont Know

Cause of Death: Primary 44 | How long sick 7 months

Immediate Paralysis | ~~Accident, Suicide, Homicide~~

Reported by D. A. Sciarotta Undertaker

Address Woodsboro Fredk Co. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70998

Attended by Dr. Simm

of Libertytown Ind

Seen by Coroner

of

Information contained in this certificate

ceived from D. A. Sharetts Undertaker

Name In Full

Certificate of Death

John Fogle

Died at Town Fredericksburg County Frederick MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
Date 1899 1	7	Age 63				

Male / ~~Female~~ | White / Colored | Married / ~~Single~~ | ~~Widow~~ / ~~Widower~~ | ~~Divorced~~ | Number of children living 1

Husband of
Wife

Father's Name

Mother's Name

Cause of Death — Primary: Heart disease 5 7 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Banner of Liberty 1-12

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70898

Rocky Hall Church

Rev R. L. Patterson.

Name in ~~Full~~ Lloyd T. Forsythe

Certificate of Death

Died at Town Frederick County " MARYLAND

Date 189 9 Month 1 Day 14 | Age Y. X M. 1 D. 14 | Native of Md | Occupation X

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ Widow ~~Widower~~ Divorced Number of children living

Husband of Wife X

Father's Name Jas P. Forsythe

Mother's Name Fannie E Taylor

Cause of Death: Primary Capillary Bronchitis — How long sick 4 days

Immediate Apnoea 71 — Accident, Suicide, Homicide

Reported by O H Goodell MD

Address Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full Catherine S. Geisinger

Certificate of Death

Died at Town Walkersville County Frederick MARYLAND

Date 1899 Month 1 Day 2 | Age Y. M. D. | Native of | Occupation

~~Male~~ White Married Widow Divorced

Female Colored ~~Single~~ Widower Number of children living

Husband of Wife

Father's Name Mother's Name

Cause of Death: Primary 161 | How long sick

Immediate Banner | Accident, Suicide, Homicide

Reported by Banner of Liberty 1-12

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79888

Interment at Israel's Creek.

Name In Full Geo. Hanshaw

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 189 9 Month 1 Day 7 Age Y. 3 M. 0 D. Native of Occupation

Male ~~Female~~ White Colored Married Single Widow Widower Divorced Number of children living

Husband of
Wife

Father's Name Mother's Name

Cause of Death: Primary La Grippe 9 How long sick

Immediate Accident, Suicide, Homicide

Reported by Banner & Liberty 1-12

Address [redacted]

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79668

Name in Full George E. Hauchew

Certificate of Death

Died at Town Frederick County Fredk MARYLAND

Date 1899 Month 1 Day 7 Age Y. 36 M. 9 D. Native of Md Occupation Bar Keeper

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single Widow ~~Widower~~ Divorced ~~Number of children living~~

Husband of X
Wife

Father's Name Frederic Hauchew Mother's Name

Cause of Death Primary Alcoholism 34 How long sick 4 days

Immediate Heart failure ~~Accident, Suicide, Homicide~~

Reported by C. F. Goodell M D

Address Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Chas. F. Hitselberger

Certificate of Death

Died at Town Liberty-town County Frederick MARYLAND

Date 189 9 Month 1 Day 19 Age Y. 76 M. 11 D. Native of Occupation

Male ~~Female~~ White ~~Colored~~ Married Single Widow Widower Divorced Number of children living

Husband of Wife

Father's Name Mother's Name 44

Cause of Death Primary Paralysis and complications How long sick

Immediate Accident, Suicide, Homicide

Reported by Ira W. Beall, M.D.

Address Liberty-town, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name In Full

Mary Hoke

Certificate of Death

Died at Emmitsburg (Town) Frederick Co (County) MARYLAND

Date 1899 Month Jan Day 3

Age Y. 85 M. 9 D. 12

Native of Penna

Occupation

~~Male~~ Female

White ~~Colored~~

Married ~~Single~~

Widow ~~Widower~~

Number of children living 6

~~Husband~~ Wife of Jacob Hoke

Father's Name Mr Link

Mother's Name Mrs Fissle

Cause of Death — Primary: Old Age 141

How long sick: 3 Months

Immediate

~~Accident, Suicide, Homicide~~

Reported by Joseph Hoke

Address Emmitsburg Frederick Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. R L Amman
of Emmitsburg Frederick Co
Md

Seen by Coroner _____
of _____

Information contained in this certificate received from The Family
of Mary Hoke

Name in Full

Certificate of Death

William Holter

Died at: Town Near Middletown County Frederick MARYLAND

Date 1899 Month Jan Day 27th Age Y. 67 M. 2 D. 10 Native of Frederick Co Occupation Farmer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 6

Husband ~~Wife~~ of Elizabeth Coblentz

Father's Name William Holter Mother's Name

Cause of Death: Primary La Gripp 9 How long sick 12 days

Immediate Pneumonia ~~Accident, Suicide, Homicide~~

Reported by Henry C Feete undertakes

Address Middletown Frederick Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. John I Culler

of Jefferson Frederick co md

...en by Coroner

of

Information contained in this certificate received from the family of Mr Holter

of statemy Dr Culler was the Attending Physician as he was some distance from me

Respectfully
Henry C Feete
undertaker Middletown I could not get a certificate

Name in Full Huffer

Certificate of Death

Died at Town near Middletown County Frederick MARYLAND

Date 1899 Month / Dey / Age Y. 7 M. D. Native of Occupation

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Singla ~~Widower~~ ~~Number of children living~~

Husbend of Wifa

Father's Name Jacob T. Huffer Mother's Name

Cause of Deeth Primary Brain trouble 5-2 How long sick

Immadiate Accident, Suicide, Homicida

Reported by Banner of Liberty 1-12

Address

Must be signed by physician, if any in attendance, otherwise by cordner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full

Certificate of Death

× Kalb

Still Born Town Frederick County Frederick MARYLAND

~~Died~~ Born Dead Month 1 Day 18 Y. M. D. Native of Occupation

Date 1899 Age

Male ~~Female~~ White ~~Colored~~ ~~Married~~ ~~Single~~ ~~Widow~~ Widower ~~Divorced~~

Husband of × ×
Wife

Father's Name D. D. Kolb — Mother's Name Ella Kolb —

Cause of Death: Primary Still Born — How long sick ×

Immediate Unknown —

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by Franklin Buchanan Smith M.D.

Address at request of Health office. Frederick the birth having been previously reported

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 66868

Name in Full Columbia A. Kemp

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 189 9 Month 1 Day 24 Age Y. 67 M. 5 D. 6 Native of Md Occupation ——

~~Male~~ White Married Widow ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ Number of children living 5

~~Husband~~ Widow of C. Wesley Kemp Dec'd

Father's Name John Rhodes Mother's Name Minerva Rice

Cause of Death Primary Pneumonia 72 How long sick 5 days

Immediate ——— ~~Accident, Suicide, Homicide~~

Reported by Dr Wm Crawford Johnson

Address Fredk Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Eveline M. Kohlenberg.

Died at Town Adamstown, County Frederick. —— MARYLAND

Date 1899 Month Jan. Day 6 | Age Y. 80 M. — D. 3 | Native of Va. | Occupation

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ ~~Single~~ Widow ~~Widower~~ ~~Divorced~~

Number of children living 4

~~Husband~~ Wife of Adam Kohlenberg

Father's Name

Mother's Name

Cause of Death: Primary Pneumonia 72 — How long sick 11 days

Immediate Heart failure — ~~Accident, Suicide, Homicide~~

Reported by T. B. Johnson.

Address Adamstown, Md.

Must be signed by physician, if any in attendance, otherwise by coroner undertaker or minister.

LIBRARY BUREAU, 65968

Nama in Full

Certificate of Death

Gregg Gibson Rimmel

Died at Town: Near New London County: Frederick MARYLAND

Date 189 9 Month: 1 Day: 27 Age Y. 6 M. 3 D. 0 Native of Co Occupation

Male / Female — White / Colored — ~~Married~~ / Single — ~~Widow~~ / Widower — ~~Divorced~~ / Number of children living

Husband / Wife of

Father's Name Darby Rimmel

Mother's Name Hannie Rimmel

Cause of Death: Primary Membranous Croup 86 — How long sick

Immediate Asphyxia — Accident, Suicide, Homicide

Reported by D. M. Devilbiss MD

Address Woodville Frdk Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65P8B

Name in Full Infant of Alywrotes Lee

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 1899 Month Jun Day 16 Age Y. x M. x D. x Native of Frederick Occupation X

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored ~~Single~~ ~~Widower~~ ~~Number of children living~~

Husband of Wife — X X X X

Father's Name Alywrotes Lee Mother's Name Bertha Lee

Cause of Death Primary Stillborn ~~How long sick~~

Immediate ~~Accident, Suicide, Homicide~~

Reported by W. A. Fory M.D.

Address 45-5 Market, Frederick Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Nama In Full Frank P. McDonald

Certificate of Death

Died at Town Frederick City County Frederick MARYLAND

Date 1899 Month 1 Day | Age Y. 52 M. D. | Native of | Occupation

Male ~~Female~~ | White Colored | Married ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ | Number of children living 1

Husband of
Wife

Father's Name

Mother's Name

Cause of Death — Primary: Paralysis 44 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Emmitsburg Chronicle. 1-6

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78898

Name in Full Isaiah Mealey

Certificate of Death

Died at Town Frederick County — MARYLAND

Date 1899 Month 1 Day 26 Age Y. 97 M. 6. D. 5 Native of Md Occupation Miller

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ ~~Single~~ Widower Number of children living 5

Husband of Wife

Father's Name

Mother's Name 141

Cause of Death Primary Senile Debility How long sick 1 day

Immediate Cerebral Paralysis Accident, Suicide, Homicide

Reported by C. F. Goodell, MD

Address City

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full Nina Miller

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 189 9 Month / Dey 7 | Age Y. 9 M. D. | Native of | Occupetion

~~Male~~ Femele | White Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of children living

Husband of
Wife

Fether's Name | Mother's Name

Cause of Death: Primary Pneumonia 7-2 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Banner & Liberty 1-12

Address

Must be signed by physician, if any in ettendance, otherwise by coroner, underteker or minister.

LIBRARY BUREAU, 79898

Name in Full — Certificate of Death

Nina Miller

Died at Town: Frederick, County: Md Frederick MARYLAND

Date 1899 Month 1 Day 7 | Age Y. 9. M. 10 D. – | Native of U.S. | Occupation X

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single Widower Number of children ~~living~~

Husband / Wife of X

Father's Name Dead 9 Mother's Name Mrs Chas Miller

Cause of Death: Primary La Grippe – (Probably — How long sick 12 hours

Immediate Broncho Pneumonia — ~~Accident, Suicide, Homicide~~

Reported by Franklin Buchanan Smith M.D.

Address Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

C C Carly
Mt Olivet
Jan 9, '99

Name In Full

Certificate of Death

Margaret Myers

Died at Town Walkersville County Frederick MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
Date 1899 1		Age 77				

Male / Female

White / Colored

Married / ~~Single~~ / Widow / Widower

Divorced

Number of children living 3

Husband of Wife

Father's Name

Mother's Name

Cause of Death: Primary 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Banner & Liberty 1-19

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70998

Buried at Dallastown, Pa.

Name In Full

Mrs. Catharine Rusbaum

Certificate of Death

Died at Mt. Pleasant (Town) County Frederick MARYLAND

Date 189 9 Month 1-21 Day | Age Y. 83 M. 2 D. 13 | Native of | Occupation

Male / Female | White / Colored | Married / ~~Single~~ | Widow / ~~Widower~~ | Divorced | Number of children living

~~Husband~~ Wife of Samuel Rusbaum

Father's Name | Mother's Name

Cause of Death — Primary: Pneumonia 7 2 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by American Sentinel

Address 2-4

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 79898

Name In Full M. Offutt, Jr.

Certificate of Death

Died at Town County Frederick MARYLAND

Date 1899 Month 1 Day | Age Y. M. D. | Native of | Occupation

Male White Married Widow Divorced

~~Female~~ ~~Colored~~ Single Widower Number of children living

Husband of Wife

Father's Name

Mother's Name

Cause of Death: Primary Pneumonia 72 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Brunswick Herald 2-3

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full Martha Only

Certificate of Death

Died at Town Frederick County Fred. MARYLAND

Date 1899 Month 1 Day 8 Age Y. 25 M. D. Native of Md Occupation H K

~~Male~~ ~~White~~ Married ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ Widower Number of children living 5

Husband of Wife Charles Only

Father's Name Randolph Nichols Mother's Name 1

Cause of Death Primary Tuberculosis of Lungs How long sick 5 months

Immediate Typhoid Fever 1 Accident, Suicide, Homicide

Reported by C F Goodall MD

Address Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full — Certificate of Death

Ann Sophia Paisley —

Died at Town: Frederick — County: Frederick — MARYLAND

Date 1899 — Month: 1 — Day: 7 — Age: Y. 72 M. 5 D. 9 — Native of: City — Occupation: X

~~Male~~ / Female — White / ~~Colored~~ — ~~Married~~ / Single — Widow / ~~Widower~~ — ~~Divorced~~ / ~~Number of children living~~

Husband / Wife of ———

Father's Name — Emly — Mother's Name X

Cause of Death — Primary: Apoplexy — 42. — How long sick: Death immediate

Immediate: " " "

~~Accident, Suicide, Homicide~~

Reported by Franklin Buchanan Smith M.D.

Address Frederick Md — Acting for Corner —

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full

Certificate of Death

Rev. Daniel K. Sayler

Died at Town: Ijamsville County: Frederick MARYLAND

Date 189 Month: Jan. Day: 3rd Age Y. 81 M. 6 D. 16 Native of Maryland Occupation Preacher Farmer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 3

Husband ~~Wife~~ of Mary Ann Ogle

Father's Name Solomon Sayler

Mother's Name Christina Grabill

Cause of Death: Primary congestion apoplexy — How long sick 3 days

Immediate apoplectic coma 42

~~Accident, Suicide, Homicide~~

Reported by J. H. Sidwell

Address Ijamsville Frdk Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Martha E. Seeburger

Died at Town: Brunswick County: Frdk. MARYLAND

Date 1899 Month: June Day: 4

Age Y. 35 M. 7 D. 19

Native of Germany

Occupation Housewife

~~Male~~ Female

White ~~Colored~~

Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~

Number of children living 6

~~Husband~~ Wife of Chas F Seeburger

Father's Name Augustus Koch

Mother's Name Martha Koch

Cause of Death: Primary Miscarriage 116 How long sick 4 hours

Immediate Hemorrhage ~~Accident, Suicide, Homicide~~

Reported by A. G. Horine M.D.

Address Brunswick Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65965

Received 1-6-99

9 a.m

Name in Full Edith Speak

Certificate of Death Dr. Diller

Died at Town Rocky Ridge County Fredk MARYLAND

Date 1899 Month Jany. Day 7 Age Y. M. D. 10.21 Native of Md. Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife —

Father's Name George W. Speak

Mother's Name Mary A Fox

Cause of Death Primary Broncho-Pneumonia

Immediate Entero colitis & Convulsions

How long sick 5 days

Accident, Suicide, Homicide

Reported by Chas. H. Diller

Address D. P. Creek Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name In Full

Certificate of Death

Mrs Elizabeth Slagle

Died at Woodsboro (Town) Frederick (County) MARYLAND

Date 1899 January 28 | Age Y. 89 M. D. 7 | Native of Md | Occupation

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ ~~Single~~ | Widow ~~Widower~~ | ~~Divorced~~

Number of children living 5

~~Husband~~ Wife of William Slagle

Father's Name dont Know | Mother's Name dont Know

Cause of Death: Primary 141 | How long sick 9 moths

Immediate General debility | ~~Accident, Suicide, Homicide~~

Reported by D. A. Sharetts Undertaker

Address Woodsboro, Fredk. Co. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. Had no doctor in her last illness Former physician Dr William H Wagner of Woodsboro. Md

Seen by Coroner

of

Information contained in this certificate received from D. A. Sharetts Undertaker

Name In Full

Certificate of Death

Rebecca Trail

Town

County

Died at Frederick Co. MARYLAND

	Month	Dey		Y.	M.	D.	Native of	Occupetion
Date 1899	1	12	Age	1.	4	24	U.S.	x

~~Male~~ White ~~Married~~ Widow ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husbend of x

Wife

Father's Neme Chas B. Trail

Mother's Name Grace. Trail

Cause of Death

Primary Catarrhal Fever — 154 — How long sick 2 wks

Immediate Broncho Pneumonia — ~~Accident, Suicide, Homicide~~

Reported by Franklin Buchanan Smith

Address Frederick, Md

Must be signed by physician, if any in attendance, otherwise by coroner, underteker or minister.

LIBRARY BUREAU, 79895

Name in Full

Certificate of Death

George Wenz

Died at Town Frederick, County Frederick Co. MARYLAND

Date 1899 Month Jan. Day 24- Age Y. 57 M. 3 D. 20 Native of Frederick, Occupation Merchant

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ Widower ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name Louis Wenz

Mother's Name Barbara Kerfs

Cause of Death: Primary Consumption 22a — How long sick 4 years

Immediate

Accident, Suicide, Homicide

Reported by J. F. Smith

Address 40 East 2d St-

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65868

Name in Full John C. Williams. Certificate of Death

Town County Frederick

Died at MARYLAND

Date 189 9 Month 1 Day 3 Age Y. 83 M. D. Native of Occupation

Male White Married Widow Divorced

~~Female~~ Colored ~~Single~~ Widower Number of children living

Husband of Wife

Father's Name Mother's Name

Cause of Death Primary 161 How long sick

Immediate Accident, Suicide, Homicide

Reported by Brunswick Herald 1-13

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79999

Buried in Lovettsville Union Cemetery.